## Convenient 1 Safe 1 Efficient 1 Secure 1 Confidential

# Electronic Payment of Child Support

The South Dakota Department of Social Services' Division of Child Support (DCS) is required by state law to use automated procedures to disburse child support payments. (SDCL 25-7A-3.2)

Custodial parents have two options for receiving their child support payments. You may choose to either have your child support directly deposited into your bank account, or you can receive your payments through an electronic payment card called the U.S. Bank ReliaCard Visa.

In most cases, child support payments will be received by your bank, if you choose direct deposit, or by U.S. Bank ReliaCard within two to three business days after DCS applies the payment. You will not receive your child support payments any later than you would have normally received your checks by mail.

## **Direct Deposit**

Direct deposit is the electronic deposit of your child support into your bank, savings and loan, or credit union account. To select direct deposit for your child support payments, you must complete the Direct Deposit Enrollment and Authorization Form on the back of this brochure.

You may designate <u>only one</u> account for your child support payments. Mail your completed form to the Direct Deposit Program (the address is listed on the form) with the required documentation.

### **Electronic Payment Card**

If you do not enroll in direct deposit, the ReliaCard Visa will automatically be sent to you. The ReliaCard Visa is an electronic payment card; it is not a credit card. It is a prepaid debit card to which your child support payments are directly deposited.

You can use the card to get cash at automated teller machines (ATMs) and cash back at many retail stores. You can also use the card at grocery stores, gas stations, shopping malls, online purchases, bill paying, and mail or telephone orders.

The ReliaCard Visa gives you a monthly statement that makes it easy to track your account activity. After enrollment, you will receive customer service information from U.S. Bank.



### **Electronic Payment Benefits**

Some of the benefits of direct deposit and the ReliaCard Visa are:

- Saves you time from depositing and cashing checks; no check cashing fees.
- Eliminates the risk of child support checks being lost or stolen.
- Ensures payments are received timely by eliminating postal delays such as address changes, weather conditions, or postal routing errors.
- Provides greater security than carrying cash.
- Provides convenience for cash withdrawals at ATMs and banks.
- Allows purchases and cash back at retail stores with use of the ReliaCard Visa, rather than using cash or checks.
- Reduces the cost of disbursing payments, which saves taxpayer dollars.

## **Electronic Payment Exemptions**

If there is a reason that prevents you from using direct deposit or the ReliaCard Visa, you must complete the Exemption Request Form and return it to:

Division of Child Support Attn: Electronic Payment Coordinator 700 Governors Drive Pierre, SD 57501

## **Exemption Request Form**

| I am requesting an exemption from electronic payment of my child support because:  |
|--|
| There is no ATM or financial institution that allows Visa cash advances within 50 miles of my home or employer location, and I am unable to establish a checking or savings account at a financial institution. (You must include documentation that a financial institution denied an application to establish an account or that a financial institution has involuntarily closed your account within the past 12 months.) |
| I am currently involved in legal proceedings, such as bankruptcy, which requires payments to be sent to a trustee or other representative payee. (Please attach documentation.)  |
| ☐ I have a court-appointed guardian or conservator. (Please attach documentation)  |
| Name (Print):  |
| Case Number:   |
| Social Security Number:  |
| Signature:   |
| Date:  |

Detach here. After completing, mail to the address listed to the left.

X

## DIRECT DEPOSIT ENROLLMENT AND AUTHORIZATION

SD DEPARTMENT OF SOCIAL SERVICES

DIVISION OF CHILD SUPPORT DIRECT DEPOSIT PROGRAM 700 GOVERNORS DRIVE, PIERRE, SD 57501 (605) 773-3641

I want the Division of Child Support to deposit my child support payments directly into my personal account in the financial institution listed below.

#### **PERSONAL INFORMATION (Please Print)**

| I LIKOONAL IIVI   | Orthitation (i lease i filit)  |                 |        |                   |  |
|---|--|-----------------|--------|-------------------|--|
| Name: (Last, F  | irst, Middle)  |                 |        |                   |  |
| Address: (Street)   |  |                 |        | Apartment Number: |  |
| City:   |  |                 | State: | Zip Code:         |  |
| Daytime Teleph  | none:  | curity Number:  |        |                   |  |
| Disclosure of the Social Security number is requested for the purpose of ensuring correct identification of individuals in the state case registry. Social Security numbers are required to be included in the state case registry pursuant to 42 USC 654a(e)(3) and (e)(4)(D). Failure to disclose this information will affect enrollment in the direct deposit option.  FINANCIAL INSTITUTION INFORMATION (Please Print) |  |                 |        |                   |  |
| Financial Institution Name:   |  |                 |        |                   |  |
| Address: (Street)   |  |                 |        |                   |  |
| City:   |  |                 | State: | Zip Code:         |  |
| Financial Institution Routing Number:   |  | Account Number: |        |                   |  |
| ACCOUNT TYPE (Check One)  |  |                 |        |                   |  |
| Checking:   | Attach a <b>voided</b> , <b>blank check</b> from the checking account to which the direct deposit will be made. Your name must appear on the account.  |                 |        |                   |  |
| Savings:  | Attach a letter from your financial institution with your name, address, the financial institution's routing number, and your personal account number. The letter must be on financial institution letterhead, or a preprinted form, and signed by a financial institution representative. Your name must appear on the account. |                 |        |                   |  |
| AUTHORIZATION  I authorization the Division of Child Support to credit my support payments to the above account and, if necessary,  |  |                 |        |                   |  |

I authorization the Division of Child Support to credit my support payments to the above account and, if necessary, reverse any incorrect payments made in error. I acknowledge that a new enrollment form must be completed if I choose to change financial institutions or account numbers. I further acknowledge that I must notify the Division of Child Support immediately, in writing, if my account is closed.

| Signature: | Date: |
|------------|-------|
|            |       |

# For More Information Call the Division of Child Support at:

(605) 773-3641



Visit Us Online at: www.dss.sd.gov/childsupport

#### **DSS Nondiscrimination Policy:**

Detach here. After completing, mail to the address listed on the form.

It is the policy of the Department of Social Services (DSS) to make sure that applications for program benefits and services are made available to everyone and that program benefits are granted to all who meet eligibility standards. DSS staff, programs and policies must not discriminate against clients or applicants for services because of race, color, sex, age, disability, religion and national origin. DSS must also provide fair and equal access to all of its programs and services for people with disabilities; this includes both physical access to buildings and access to programs and services. To file a complaint of discrimination write: DSS Division of Legal Services, 700 Governors Drive, Pierre, SD 57501-2291 or call: (605) 773-3305. If you have a question regarding program services, please contact your nearest DSS office.

5,000 copies of this document were printed by DSS at a cost of 11 cents per copy. DSS/DCS/5M/0806

# Electronic Payment of Child Support



Direct Deposit or Electronic Payment Card

DEPARTMENT OF SOCIAL SERVICES
DIVISION OF CHILD SUPPORT